## COVER SHEET FOR AMENDMENT OF POST-TRAVEL SUBMISSION

SECRETARY OF THE SENATE PUBLIC RECORDS

2019 DEC 11 PH 4: 19

Instructions: Use this form as a cover sheet for any paperwork you may need to submit to the Office of Public Records in order to make your Privately Sponsored Post-Travel Submission complete in accordance with Rule 35. Only complete this form if you need to submit an amendment to a post-travel filing you have already submitted.

## SUBMIT DIRECTLY TO THE OFFICE OF PUBLIC RECORDS IN 232 HART BUILDING

Jordan Ebert	
Name of Traveler:	
	States Senator Jerry Moran
Employing Office/Committee:	
	erence of State Bank Supervisors
Fravel Expenses Paid by (List all sources):	2010
September 30, 2019 - October 2, Fravel Date(s):	, 2019
· · · · · · · · · · · · · · · · · · ·	Post-Travel Disclosure of Travel Expenses (Form RE-2)
Description/Title of Attached Forms:	, del 172701 2 100100010 01 172701 211pontodo (1 01111 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2
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<u> </u>	Did not chack the hoves cortifuing
Purpose of Amendment (describe the reason for	Did not check the boxes certifying amending original submission):
•	ification Form with all attachments were attached.
TOTAL TOTAL TOTALO OPONOOL TIGIOLOGIA	
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12/11/2010	( Lan V YHA
10/11/2019	
((Data))	(Signature of Traveler)

## **Employee Post-Travel Disclosure of Travel Expenses**

	Dat	e/Tir	ne St	amp:	
				-	

Doot Troval Filing In	stanstions, Complet	a thia farm within 20 da	us of roturning from	
2	•	e this form within 30 da blic Records in 232 Har	•	
In compliance with Ru be reimbursed/paid for	• • • • • • • • • • • • • • • • • • • •	_	sures with respect to	travel expenses that have been or v
A copy of the Priva	te Sponsor Travel Ce Conference of Sta	orization (Form RE-1), <u>A</u> ertification Form with all attentions at the Bank Supervisors	<del></del>	y, invitee list, etc.)
Private Sponsor(s) (list Septemt	er 30, 2019 - October 2	2, 2019		<u>.                                    </u>
Travel date(s):	· · · · · · · · · · · · · · · · · · ·			<del></del>
Name of accompanying Relationship to Travele	er:   Spouse	Child		
		EASE DUE TO THE ACC EXPENSES. (Attach addit		SE OR DEPENDENT CHILD, ONLY 1.)
Expenses for Employe	ee: Transportation Expenses	Lodging Expenses	Meal Expenses	Other Expenses (Amount & Description)
☐ Good Faith Estimate	63.69		47.23	
🖾 Actual Amount				
Expenses for Accomp	anying Spouse or D	ependent Child (if applic	able):	
	Transportation Expenses	Lodging Expenses	Meal Expenses	Other Expenses (Amount & Description)
☐ Good Faith Estimate ☐ Actual Amount				
necessary.): Attended a	•	dule of events beginning wit		ttach additional pages if arks" at 8:15am on October 1 through
12/11/2019	Tordan	Ebert.		Lar James and the second
TO BE COMPLETED	•	name of traveler)  G MEMBER/OFFICER:		(Signature of traveler)
			ections with travel des	scribed in the <i>Employee Pre-Trave</i>
	<u>-</u>	ation, lodging, and related		· ·
10/11/2012			Jem	Moran

12/11/2019 (Date) (Signature of Supervising Senator/Officer)

(Revised 1/3/11)